

MAY 04 2007

## NIXON PEABODY LLP

Attorneys at Law

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From: Ronald I. Eisenstein Leena H. Karttunen	Date: May 4, 2007	No. of Pages: 14 (including this page)	700157-048012-RCE2
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Practitioner's Docket No. 700157-048012-RCE2

PATENT

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:	David E. Fisher	Confirmation No.:	7211
Application No.:	09/229,283	Group No.:	1642
Filed:	01/13/1999	Examiner:	Susan NMN UNGAR

For: USE OF MICROPHTHALMIA FOR DIAGNOSIS, PROGNOSIS AND/OR TREATMENT OF MELANOMA

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P.O. Box 1450  
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I hereby certify that the following papers are being facsimile transmitted to the Patent and Trademark Office at (571) 273-8300 on the date shown below:

1. Certificate of Facsimile Transmission (1 pg.);
2. Transmittal Form (1 pg.);
3. Request for Corrected Filing Receipt (2 pp.);
4. Application Data Sheet (5 pp.);
5. COPY - Previously Submitted Declaration and Power of Attorney (3 pp.); and
6. COPY - Filing Receipt with Corrections Marked in Red Ink (1 pg.).

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CONFIRMATION: DATE SENT May 4, 2007 TIME \_\_\_\_\_BY Lisa Michelle Pittsley

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**Practitioner's Docket No. 700157-048012-RCE2**

**PATENT**

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re application of:	David E. Fisher	Confirmation No.:	7211
Application No.:	09/229,283	Group No.:	1642
Filed:	01/13/1999	Examiner:	Susan NMN UNGAR

For: **USE OF MICROPTHALMIA FOR DIAGNOSIS, PROGNOSIS AND/OR TREATMENT OF MELANOMA**

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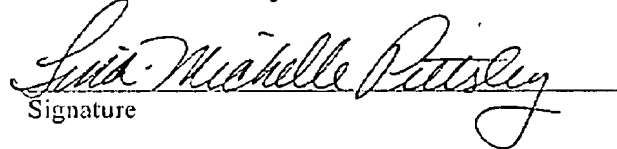
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6. COPY - Filing Receipt with Corrections Marked in Red Ink (1 pg.).

May 4, 2007

Date

Tina-Michelle Pittsley

  
Signature

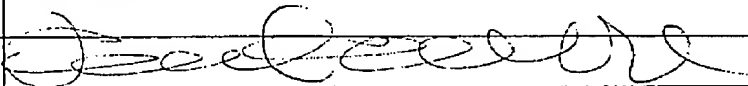
Certification of Facsimile Transmission--page 1 of 1

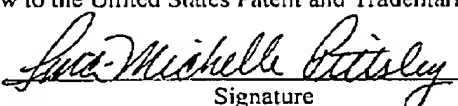
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<b>TRANSMITTAL FORM</b> <i>(to be used for all correspondence after initial filing)</i>	Application Number	09/229,283
	Filing Date	01/13/1999
	First Named Inventor	David E. Fisher
	Group Art Unit	1642
	Examiner Name	Susan NMN UNGAR
Total Number of Pages in This Submission	Attorney Docket Number	700157-048012-RCE2

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Declaration and Power of Attorney <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Application Data Sheet <input type="checkbox"/> Request for Corrected Filing Receipt with Enclosures <input type="checkbox"/> A self-addressed prepaid postcard for acknowledging receipt <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Facsimile Cover Sheet; Certificate of Facsimile Transmission; Request for Corrected Filing Receipt; Application Data Sheet; COPY - Previously Submitted Declaration and Power of Attorney; COPY - Filing Receipt with Corrections Marked in Red Ink.
Remarks		<input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees required or credit any overpayments to Deposit Account No. 50-0850 for the above identified docket number.

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Nixon Peabody LLP
Signature	
Name	Ronald I. Eisenstein (Reg. No. 30,628)/Leena H. Karttunen (L0207)
Date	May 4, 2007

CERTIFICATE OF MAILING [37 CFR 1.8(b)]	
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<input type="checkbox"/> deposited with the United States Postal Service on the date shown below with sufficient postage as first class mail in an envelope addressed to: MAIL STOP MISSING PARTS, Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450	
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May 4, 2007 Date	 Signature Tina-Michelle Pittsley Typed or printed name

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Practitioner's Docket No. 700157-048012-RCE2

PATENT

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: David E. Fisher  
Application No.: 09/229,283  
Filed: 01/13/1999

Confirmation No.: 7211  
Group No.: 1642  
Examiner: Susan NMN UNGAR

For: CELLULAR DIAGNOSTIC ARRAYS, METHODS OF USING AND  
PROCESSES FOR PRODUCING SAME

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## REQUEST FOR CORRECTED FILING RECEIPT

1. Attached is a copy of the official filing receipt received from the PTO in the above application for which issuance of a corrected filing receipt is respectfully requested.

2. There is an error with respect to the following data, which is:

☒ incorrectly entered

*and/or*

☐ omitted.

*Error in*

1. ☒ Applicant's name
2. ☐ Applicant's address
3. ☐ Applicant's name
4. ☐ Applicant's address
5. ☐ Applicant's name
6. ☐ Applicant's address
7. ☐ Applicant's name
8. ☐ Applicant's address
9. ☐ Title

*Correct data*

1. David E. ~~Fischer~~ Fisher
- 2.
- 3.
- 4.
- 5.
- 6.
- 7.
- 8.
- 9.

Page 1 of 2

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U.S.S.N. 09/229,283

Request for Corrected Filing Receipt Dated May 4, 2007

Page 2 of 2

10. [ ]	Filing Date	10.
11. [ ]	Serial Number	11.
12. [ ]	Foreign/PCT Application Re:	12.
13. [ ]	Domestic Priority	13.

3. *(complete the following applicable item)*

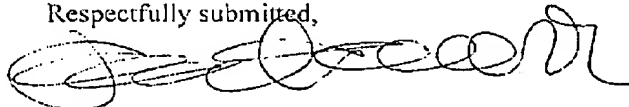
☒ The correction(s) is not due to any error by applicant and no fee is due. Applicants respectfully request that the database be corrected promptly. A copy of the executed declaration/power of attorney by the inventor FISHER is attached herewith.

OR

☐ At least one of the above corrections is due to applicant's error and the fee therefore, under 37 C.F.R. Section 1.19(h), of \$25.00 is paid as follows:

Date: May 4, 2007

Respectfully submitted,



Ronald I. Eisenstein (Reg. No. 30,628)

Leena H. Karttunen (L0207)

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(Request for Corrected Filing Receipt - Page 2 of 2)

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## APPLICATION DATA SHEET

## APPLICATION INFORMATION

Application number::	09/229,283
Filing Date::	01/13/1999
Application Type::	Regular
Subject Matter::	Utility
Suggested classification::	
Suggested Group Art Unit::	
CD-ROM or CD-R?::	None
Number of CD disks::	
Number of copies of CDs::	
Sequence submission?::	
Computer Readable Form (CRF)?::	
Number of copies of CRF::	
Title::	USE OF MICROPHTHALMLA FOR DIAGNOSIS, PROGNOSIS AND/OR TREATMENT OF MELANOMA
Attorney Docket Number::	700157-048012-RCE2
Request for Early Publication?::	No
Request for Non-Publication?::	No
Suggested Drawing Figure::	
Total Drawing Sheets::	
Small Entity?::	Yes

Latin name::	
Variety denomination name::	
Petition included?::	No
Petition Type::	
Licensed US Govt. Agency::	
Contract or Grant Numbers::	
Secrecy Order in Parent App.?::	No

## APPLICANT INFORMATION

Applicant Authority Type::	Inventor
Primary Citizenship Country::	US
Status::	Full capacity
Given Name::	David
Middle Name::	E.
Family Name::	Fisher
Name Suffix::	
City of Residence::	Newton
State or Province of Residence::	MA
Country of Residence::	US
Street of mailing address::	510 Ward Street
City of mailing address::	Newton
State or Province of mailing	MA

address::	
Country of mailing address::	US
Postal or Zip Code of mailing address::	02459

## CORRESPONDENCE INFORMATION

Correspondence Customer Number::	40679
Name::	Ronald I. Eisenstein NIXON PEABODY LLP
Street of mailing address::	100 Summer Street
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State or Province of mailing address::	MA
Country of mailing address::	US
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Phone number::	(617) 345-6054, (617) 345-1000
Fax number::	(617) 345-1300
E-Mail address::	reisenstein@nixonpeabody.com



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## REPRESENTATIVE INFORMATION

Representative Designation::	Registration Number::	Representative Name::
Attorney of Record	30,628	Ronald I. Eisenstein
Attorney of Record	34,235	David S. Resnick
Attorney	45,928	Mark J. Fitzgerald
Attorney	L0207	Leena H. Karttunen
Attorney	30,727	Michael L. Goldman
Attorney	56,183	Stephen R. Duly
Agent	58,109	Candace M. Summerford
Agent	44,784	Shayne Huff

## DOMESTIC PRIORITY INFORMATION

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application is a	Request for Continued Examination of	60/071,420	01/14/1998

## FOREIGN PRIORITY INFORMATION

Country::	Application number::	Filing Date::	Priority Claimed::

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## ASSIGNEE INFORMATION

Assignee name::	Dana-Farber Cancer Institute, Inc.
Street of mailing address::	44 Binney Street
City of mailing address::	Boston
State or Province of mailing address::	MA
Country of mailing address::	US
Postal or Zip Code of mailing address::	02115

Date: 5/4/2007

Respectfully submitted,



Ronald I. Eisenstein (Reg. No. 30,628)  
Leena H. Karttunen (L0207)  
NIXON PEABODY LLP  
100 Summer Street  
Boston, MA 02110-2131  
(617) 345-6054 / 1367

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NIXON PEABODY LLP

101 Federal Street

Boston, Massachusetts 02110

Attorney's Docket No. 48012

Page 1 of 3

## DECLARATION AND POWER OF ATTORNEY

As a below named inventor, I hereby declare that: My residence, post office address and citizenship are as stated below next to my name. I believe I am the original, first and sole inventor (if only one name is listed at 201) below or an original, first and joint inventor (if plural names are listed at 201-208 below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

USE OF MICROPHthalmia FOR DIAGNOSIS, PROGNOSIS AND/OR TREATMENT OF MELANOMA

which is described and claimed in:

- ☐ the specification attached hereto.
- ☒ the specification in U.S. Application Serial Number 09/229,283 filed on January 13, 1999; and
- ☐ the specification in PCT international application Number \_\_\_\_\_, filed on \_\_\_\_\_; and was amended on \_\_\_\_\_.

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above. I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, § 1.56(a). I hereby claim foreign priority benefits under Title 35, United States Code, § 119 of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed.

Prior Foreign/PCT Applications and Any Priority Claims Under 35 U.S.C. § 119:			
Application No.	Filing Date	Country	Priority Claimed Under 35 U.S.C. § 119?
			<input type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/> YES <input type="checkbox"/> NO

I hereby claim the benefit under 35 U.S.C. § 120 of any United States application(s) or PCT international application(s) designating the United States of America that is/are listed below, and, insofar as the subject matter of each of the claims of this application is not disclosed in that/those prior application(s) in the manner provided by the first paragraph of 35 U.S.C. § 112, I acknowledge the duty to disclose material information as defined in 37 CFR § 1.56(a) which occurred between the filing date of the prior application(s) and the national or PCT international filing date of this application:

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Prior U.S. Applications or PCT International Applications Designating the U.S.-Benefit Under 35 U.S.C. 5120				
U.S. Applications		Status (Check One)		
Application Serial No.	U.S. Filing Date	Patented	Pending	Abandoned
PCT Applications Designating the U.S.				
Application No.	Filing Date	U.S. Serial No. Assigned		
			X	

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**CLAIM FOR BENEFIT OF PRIOR U.S. PROVISIONAL APPLICATION(S)**  
(35 U.S.C. 5119(e))

I hereby claim the benefit under Title 35, United States Code, 5119(e) of any United States provisional application(s) listed below:

Applicant	Provisional Application Number	Filing Date
David E. Fisher	60/071,420	January 14, 1998

**POWER OF ATTORNEY:** As a named inventor, I hereby appoint the following attorney(s) with full powers of association, substitution and revocation to prosecute this application and transact all business in the Patent and Trademark Office connected therewith.

Ronald I. Eisenstein (Reg. No. 30,628)  
 Georgia Evans (Reg. No. 44,967)  
 Edwin V. Markel (Reg. No. 40,087)

David S. Rosnick (Reg. No. 34,235)  
 Nicole L. M. Valtz (Reg. No. 47,150)

Michael L. Goldman (Reg. No. 30,727)  
 Gunnar G. Leinborg (Reg. No. 38,584)

<b>SEND CORRESPONDENCE TO:</b> Ronald I. Eisenstein NIXON PEABODY LLP 101 Federal Street Boston, Massachusetts 02110	<b>DIRECT TELEPHONE CALLS TO:</b> Ronald I. Eisenstein (617) 345-8054
--	---

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3

201	FULL NAME OF INVENTOR	LAST NAME FISHER	FIRST NAME David	MIDDLE NAME E.
	RESIDENCE & CITIZENSHIP	CITY Newton	STATE OR FOREIGN COUNTRY MA	COUNTRY OF CITIZENSHIP USA
	POST OFFICE ADDRESS	POST OFFICE ADDRESS 510 Ward Street	CITY Newton	STATE OR COUNTRY AND ZIP CODE MA 02459

I hereby further declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further, that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Signature of Inventor 201	Date:
	5/28/03

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PAGE 14/14 \* RCVD AT 5/4/2007 3:52:25 PM [Eastern Daylight Time] \* SVR:USPTO-EFXRF-6/22 \* DNIS:2738300 \* CSID:18667410075 \* DURATION (mm-ss):03-26